FCC Foi	rm 481 - Carrier Annual Reporting REDA	ACTED - FOR PUBLI	C INSPECTION	FCC Form 481 OMB Control No. 3060 July 2013	0-0986/OMB Control No. 3060-0819
<010>	Study Area Code	351278			
<015>	Study Area Name	READLYN TEL CO			
<020>	Program Year	2015			
<030>	Contact Name: Person USAC should contact with questions about this data	Sharon Huck			
<035>	Contact Telephone Number: Number of the person identified in data line <0	3192793375 ext.			
<039>	Contact Email Address: Email of the person identified in data line <030	> readlyn@netins.net	t		
ANNUA	AL REPORTING FOR ALL CARRIERS				54.313 54.422 Completion Required Required
					(check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached wo	rksheet)	<b>✓</b>
<200>	Outage Reporting (voice)		(complete attached wo	rksheet)	<b>✓</b>
<210>	< check bo	x if no outages to report			✓
<300>	Unfulfilled Service Requests (voice)	0			
×210s	Datail on Attornate (vaice)				
<310>	Detail on Attempts (voice)				
				(attach descriptive o	document)
		, <del></del>			/
<320>	Unfulfilled Service Requests (broadband)	0			
	2				
<330>	Detail on Attempts (broadband)			(attach descriptive	document)
				(	,
<400>	Number of Complaints per 1,000 customers (vo	oice)			
<410>	Fixed 0.0	·			<b>√ /</b>
<420>	Mobile				
<430>	Number of Complaints per 1,000 customers (b	roadband)			✓ [[][][]
<440>	Fixed				
<450>	Mobile 0.0	in B. In Co.			
<500>	Service Quality Standards & Consumer Protect	ion Rules Compliance	(check to indicate cert	ification)	<b>✓</b>
	351278ia510.pdf				
<510>			(attached descriptiv	re document)	1 1

<400>	Number of Complaints per 1,000 customers (voice)	•	
<410>	Fixed 0.0		<b>✓ ✓</b>
<420>	Mobile		
<430>	Number of Complaints per 1,000 customers (broadband)		<b>√</b>
<440>	Fixed 0.0		
<450>	Mobile 0.0		
<500>	Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<b>✓</b>
	351278ia510.pdf		
<510>		(attached descriptive document)	
.520		(attached descriptive document)	
		]	
<600>	Functionality in Emergency Situations 351278ia610.pdf	(check to indicate certification)	
	33127614010.pdf		
		(attached descriptive document)	✓
<610>			
<b>\010&gt;</b>			
<700>	Company Price Offerings (voice)	(complete attached worksheet)	
<710>	Company Price Offerings (broadband)	(complete attached worksheet)	
<800>	Operating Companies and Affiliates	(complete attached worksheet)	<b>✓</b> ✓
<900>	Tribal Land Offerings (Y/N)? (if y	es, complete attached worksheet)	<b>✓</b>
<1000>	Voice Services Rate Comparability	(check to indicate certification)	<b>✓</b>
		7	
<1010>		(attach descriptive document)	
<1100×	Terrestrial Backhaul (Y/N)? (if	□ not, check to indicate certification)	
\1100>	(i)	not, theth to maltate tertification)	
<1110>		(complete attached worksheet)	
<1200>	Terms and Condition for Lifeline Customers	(complete attached worksheet)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Price Cap Carriers, Proceed to Price Cap Additional Documentation Works	heet	

<2000> (check to indicate certification)
<2005> (complete attached worksheet)

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000> (check to indicate certification)
<3005> (complete attached worksheet)

(100) Se Data Co	(100) Service Quality Improvement Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	0-0819
<010>	Study Area Code	351278	
<015>	Study Area Name	READLYN TEL CO	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Sharon Huck	
<032>	Contact Telephone Number - Number of person identified in data line <030>	3192793375 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net	
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) (yes / no )	
<111>>	If your answer to Line <110> is yes, do you have an existing $\S 54.202(a)$ "5 year plan" filed with the FCC?	(yes / no ) O	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.	351278ia112.pdf	
	Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document	
(113) (114) (115) (116) (117) (118)	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received How (USF) was used to improve service quality How (USF)was used to improve service coverage How (USF) was used to improve service capacity Provide an explanation of network improvement targets not met in the prior calendar year.		

(200) Ser Data Coll	(200) Service Outage R Data Collection Form	(200) Service Outage Reporting (Voice) Data Collection Form	(ез						FC ON July	FCC Form 481 OMB Control No. 3060- July 2013	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	. 3060-0819
<010>	Study Area Code	ode				351278						
<015>	Study Area Name	Jame				READLYN TEL	00					
<020>	Program Year	, L				2015						
<030>	Contact Nam	Contact Name - Person USAC should contact regarding this data	S should contaα	ct regarding thi:	s data	Sharon Huck						
<032>	Contact Teler	Contact Telephone Number - Number of person identified in data line <030>	- Number of pe	erson identified	in data line <0	3192793375 ext.	ext.					
<039>		Contact Email Address - Email Address of person identified in data line <030>	il Address of po	erson identifiec	l in data line <c< th=""><th>330&gt; readlyn@netins.net</th><th>ins.net</th><th></th><th></th><th></th><th></th><th></th></c<>	330> readlyn@netins.net	ins.net					
<220>	\ \ \	b1>	<	<	<	<c1></c1>	<c2></c2>	>	\ \ \	<b>\$</b>	<b>\%</b>	<b>,</b>
	NORS Reference		Outage Start Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Did This Outage Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected	Total Number of Customers	Affected (Yes / No)	Description (Check all that apply)	Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures

(700) Pri. Data Coll	(700) Price Offerings in Data Collection Form	(700) Price Offerings including Voice Rate Data Data Collection Form	Jata				24 10	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819	B Control No. 3060-0819
							5		
<010>	Study Area Code	pde			351278				
<015>	Study Area Name	ame			READLYN TEL	000			
<020>	Program Year				2015				
<030>	Contact Name	Contact Name - Person USAC should contact regarding this data	contact regard.	ing this data	Sharon Huck				
<032>	Contact Telep	Contact Telephone Number - Number of person identified in data line <030>	er of person ide	ntified in data line <	:030> 3192793375 ext.	ext.			
<039>		Contact Email Address - Email Address of person identified in data line <030>	ss of person ide	ntified in data line <	<030> readlyn@netins.net	ins.net			
<701>		Residential Local Service Charge Effective Date	ective Date	1/1,	1/1/2014				
<70/>		vide Residential Local s	service charge						
<703>	<a1></a1>	<a2></a2>	<a3></a3>	<	<	<	                	<	<b>\$</b>
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
					See at	See attached worksheet			

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013
<010> Study Area Code	351278

		July 2013
<010>	<010> Study Area Code	351278
<015>	<015> Study Area Name	READLYN TEL CO
<020>	<020> Program Year	2015
<030>	<030> Contact Name - Person USAC should contact regarding this data	Sharon Huck
<035>	= =	ne <030> 3192793375 ext.
<039>	<039> Contact Email Address - Email Address of person identified in data line <030>	<030> readlyn@netins.net

<d4>&gt;</d4>	Usage Allowance Action Taken When Limit Reached { <i>select</i> }														
<q3></q3>	Usage Allowance (GB)														
<d2></d2>	Broadband Service - Upload Speed (Mbps)														
<d1></d1>	Broadband Service - Download Speed (Mbps)														
<>>>	Total Rate and Fees				had	201									
 	State Regulated Fees				2010 005	Lorlohoot	אסו אאו ופפר -								
 	Residential Rate					·									
<a2></a2>	Exchange (ILEC)														
<a1></a1>	State														
<711>		 •	•		 -			-	-		-	•	-	-	

(800) Operating Companies Data Collection Form			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010> Study Area Code	351278		
Study Area Name	READLYN TEL CO		
e - Person USAC should contact regarding this data	Sharon Huck		
a line <030>	3192793375 ext.		
<039> Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net	ı.	
<810> Reporting Carrier Readlyn Telephone Company			
<pre>&lt;812&gt; Operating Company Readlyn Telephone Company</pre>			
<813> <a1></a1>		<a2></a2>	<a3></a3>
Affiliates		SAC	Doing Business As Company or Brand Designation
1	- See attach	See attached worksheet	et
	_	_	

(900) Tribal Lands Reporting Data Collection Form	nds Reporting 1 Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
7010×	chan and	
	Study Alea Code	351278
<015> Study	Study Area Name	READLYN TEL CO
<020> Progr	Program Year	2015
<030> Conta	Contact Name - Person USAC should contact regarding this data	Sharon Huck
	Contact Telephone Number - Number of person identified in data line <030>	3192793375 ext.
	Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net
<910> Tribal	Tribal Land(s) on which ETC Serves	
<920> Tribal	Tribal Government Engagement Obligation	
		Name of Attached Document
		Name of Attached Document
if your company serves to confirm the status de demonstrates coordinar § 54.313(a)(9) includes: <921> Needs asses community a <922> Feasibility an <923> Marketing ss <924> Compliance v <925> Compliance v	Tribal lands, please select (Yes,No, NA) for each these boxes secribed on the attached document(s), on line 920, tion with the Tribal government pursuant to establishment and deployment planning with a focus on Tribal nochor institutions.  d sustainability planning; ervices in a culturally sensitive manner; with Rights of way processes with Land Use permitting requirements with Facilities Siting rules with Facilities Siting rules with Cultural Preservation review processes with Cultural Preservation review processes with Tribal Business and Licensing requirements.	Select (Yes, No, NA)  NA)

(1100) N	(1100) No Terrestrial Backhaul Reporting	FCC Form 481
Data Col	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	
<015>	Study Area Name	READLYN TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Sharon Huck
<032>	Contact Telephone Number - Number of person identified in data line <030>	3192793375 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

(1200) Te Lifeline Data Coll	(1200) Terms and Condition for Lifeline Customers Lifeline Data Collection Form	FCC Form 481 OMB Control No. 3060-098 July 2013	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	351278	
<015>	Study Area Name	READIVN TET. CO	
<020>	, Program Year	ANIBER TEL CO	
<030>	Contact Name - Person USAC should contact regarding this data	Sharon Huck	
<032>	Contact Telephone Number - Number of person identified in data line <030>		
<039>	Contact Email Address - Email Address of person identified in data line <030>	30> readlyn@netins.net	
		351278ia1210.pdf	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		
		Name of Attached Document	
<1220>	Link to Public Website		
"Please c	"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed on line 1230, contains the required information pursuant to		
§ 54.422(a)(2) a annually report:	5.54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:		
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,		
<1222>	Details on the number of minutes provided as part of the plan,		
<1223>	Additional charges for toll calls, and rates for each such plan.		

(2000) P	(2000) Price Cap Carrier Additional Documentation	FCC Form 481	
Data Col	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819	
Including	Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013	
Ś			
<010>			
<0.15>		READLYN TEL CO	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Sharon Huck	
<032>	Contact Telephone Number - Number of person identified in data line <030>	3192793375 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net	
		redutylitere tills . He c	
CHECK t	the boxes below to note compliance as a recipient of Incremental Connect Amer	CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II	
	Support as set fortif iff 47 CFR & 54:51-5(U),(U),(U),(U),(U),(U),(U),(U),(U),(U),	support as set form in 47 CFN 9.54.51.5(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.	
	Incremental Connect America Phase I reporting		
<2010>			
<2011>	> 3rd Year Certification {47 CFR § 54.313(b)(2)}		
	Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}		
<2012>	2013 Frozen Support Certification		
7013		<u> </u>	
\2013\		1	
<70T4>			
<2015>	<ul> <li>2016 and future Frozen Support Certification</li> </ul>		
	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}		
<2016>	<ul> <li>Certification Support Used to Build Broadband</li> </ul>		
72017	Con		
<201/2		<u> </u>	
<2018>	<ul> <li>5th year Broadband Service Certification</li> </ul>	][	
<2020>	Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	ne 2021, contains the required information shall provide the number, names, and g access to broadband service in the	
<2021>	> Interim Progress Community Anchor Institutions		
		Name of Attached Document Listing Required Information	

REDACTED - FOR PUBLIC INSPECTION	FCC Form 481	OMB Control No. 3060-0986/OMB Control No. 3060-0819	July 2013
	(3000) Rate Of Return Carrier Additional Documentation	Data Collection Form	

COLID>         Study Area Code         351278           COLIS>         Study Area Name         READLYN TEL CO           COLOS Program Year         2015           ACOS Program Year         2015           ACOS ACO Contact Name - Person USAC should contact regarding this data         Sharon Huck           ACOS ACO Contact Repeated Residual Registration of Person Identified in data line <030>         3127793375 ext.           ACOS ACO Contact Remail Address of person identified in data line <030>         readlyname in act.			
USAC sh mber - Nu	<010>	Study Area Code	351278
USAC sh mber - Nu - Email A	<015>		READLYN TEL CO
mber - Nu - Email A	<020>		2015
mber - Nu - Email A	<030>	Contact Name - Person USAC should contact regarding this data	Sharon Huck
Ā	<035>	mber - N	3192793375 ext.
	<039>	Ā	readlyn@netins.net

		July 2013
ģ	17.0	
<010>	Study Area Lode Study Area Name	351278 READLYN TEL CO
<020>		
<030>	- Person USAC should contact regarding this	Sharon Huck
<039>		3192793375 ext. readlyn@netins.net
CHECK 1	the boxes below to note compliance on its five year service quality plan (pursua CFR § 54.313(f)(2). I further certify that tl	CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47  CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.
(3010)	Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)(1)(i)}	
		Name of Attached Document Listing Required Information
(3011)		
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(i)}	
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report	Name of Attached Document Listing Required Information (Yes/No) (Yes/No) (Yes/No)
(3015)		
(3016)	relecommunications borrowers)	
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	
(3018)	if the resonnse is no on line 3014. Is vour company audited?	Name of Attached Document Listing Required Information (Yes/No)
(0100)		
(3019)	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains Either a copy of their audited financial statement, or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications	ormat comparable to RUS Operating Report for Telecommunications
(3020)		
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.	performed the company's financial audit.
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to $\S$ 54.313(f)(2), contains:	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications	
	Borrowers,	
(3023)		
(3024)	Underlying information subjected to an officer certification.	
		351278ia3026.pdf
(3026)	Attach the worksheet listing required information	
	7	Name of Attached Document Listing Required Information

	tion - Reporting Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	351278
<015>	Study Area Name	READLYN TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Sharon Huck
<035>	Contact Telephone Number - Number of person identified in data line <030>	3192793375 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to	e Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients
I certify that I am an officer of the reporting carrier; my resp recipients; and, to the best of my knowledge, the information	nsibilities include ensuring the accuracy of the annual reporting requirements for universal service support reported on this form and in any attachments is accurate.
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can	e punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	tion - Agent / Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	351278
<015>	Study Area Name	READLYN TEL CO
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Sharon Huck
<035>	Contact Telephone Number - Number of person identified in data line <030>	3192793375 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize a	Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
I certify that (Name of Agent) <u>Sharon Huck</u> also certify that I am an officer of the reporting carrier; my respon agent; and, to the best of my knowledge, the reports and data pro	is authorized to submit the information reported on behalf of the reporting carrier. ibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ided to the authorized agent is accurate.
Name of Authorized Agent: Sharon Huck	
Name of Reporting Carrier: READLYN TEL CO	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/19/2014
Printed name of Authorized Officer: Sharon Huck	
Title or position of Authorized Officer: General Manager	
Telephone number of Authorized Officer: 3192793375 ext.	
Study Area Code of Reporting Carrier: 351278	Filing Due Date for this form: 06/30/2014
, ,	ed by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment Title 18 of the United States Code, 18 U.S.C. § 1001.

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI	Recipients on Behalf of Reportin	g Carrier
, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal servic the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the		• , ,
Name of Reporting Carrier: READLYN TEL CO		
Name of Authorized Agent or Employee of Agent: Kiesling Associates LLP		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/19/2014
Printed name of Authorized Agent or Employee of Agent: Robert Umsted		
Fitle or position of Authorized Agent or Employee of Agent Regulatory Consultant		
Telephone number of Authorized Agent or Employee of Agent: 5152230159 ext.		
Study Area Code of Reporting Carrier: 351278 Filing Due Date for this form:	06/30/2014	

Attachments

# **ATTACHMENT – LINE 112**

# **ATTACHMENT REDACTED IN ENTIRETY**

# FCC Form 481, Line 510: Certification of Compliance with Applicable Service Quality Standards and Consumer Protection Rules

Iowa Administrative Code §199-22.6 requires an ETC to certify in its annual report that it is complying with applicable service quality standards and consumer protection rules. The ETC will measure its service connection, held order, and service interruption performance monthly according to this section. Readlyn Telephone Co. certifies that it has complied with these requirements and will continue to comply with these requirements.

### FCC Form 481, Line 610: Certification Regarding Ability to Function in Emergency Situations

Iowa Administrative Code §199-22.6(5) requires an ETC to certify in its annual report that it is complying with provisions to meet emergencies including but not limited to the provision of emergency power. Each central office shall contain a minimum of two hours of battery reserve and for offices without permanently installed emergency power facilities, there shall be access to a mobile power unit with enough capacity to carry the load which can be delivered on reasonably short notice and readily connected. Readlyn Telephone Co. certifies that it has complied with these requirements and will continue to comply with these requirements.

	al per line F	CC> Acc 1 per line Rat 17.0	C> < C> 17.0	< < 17.0	<c> <c> 17.0</c></c>	<c>   17.0</c>	al per line Rates a	al per line Rates a	<c><c> 17.0</c></c>	al per line Rates an	al per line Rates an	d per line Rates and	al per line Rates and	cc> 17.0	<c> 17.0  17.0    17.0   17.0   18.0   19</c>	cc> 17.0	al per line Rates and 17.0	cc> 17.0	
<92>																			
<92>	 <bs> <bs> Andatory Extended Area Service Charge</bs></bs>	        	    Mandatory Extended Area Service Charge	   	   Mandatory Extended Area Service Charge 0.0	   	   	   	   	   	   	   	   	   	   	<bs></bs> Andatory Extended Area Service Charge 0.0	   	  Andatory Extended Area Service Charge 0.0	Abs>  Mandatory Extended Area Service Charge  0.0
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404>																			
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	ILEC) SAC (CETC) Rate Type Service Rate State Subscriber Line Charge State Universal Service Fee Service Charge	SAC (CETC) Rate Type Service Rate Subscriber Line Charge State Universal Service Fee Service Charge 0.0 0.0 0.0	ILEC) SAC (CETC) Rate Type Service Rate State Subscriber Line Charge State Universal Service Fee Service Charge Charge 0.0 0.0 0.0	ILEC) SAC (CETC) Rate Type Service Rate State Subscriber Line Charge State Universal Service Fee Service Charge Service Charge 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	ILEC) SAC (CETC) Rate Type Service Rate State Subscriber Line Charge State Universal Service Fee Service Charge	Nandatory Extended Area  Service Rate  Service Rate  Service Charge  17.0  0.0  0.0  0.0	Nandationy Extended Area  Service Rate  Service Rate  Service Charge  17.0  D.0  D.0  D.0  D.0  D.0  D.0  D.0	Nandatory Extended Afrea  Service Rate  Service Rate  Service Charge  17.0  0.0  0.0  0.0  0.0	Nandationy Extended Area  Service Rate  Service Rate  Service Charge  Service Charge  0.0  0.0  0.0  0.0	Nandadory Extended Area  Service Rate  Service Rate  Service Charge  17.0  0.0  0.0  0.0	Nandadory Extended Area  Service Rate  Service Charge  Service Charge  Service Charge  O.0  O.0  O.0  O.0  O.0  O.0  O.0  O.	Nandadory Extended Area Service Rate State Subscriber Line Charge State Universal Service Fee Service Charge Se	LEC   SAC (CETC)   Rate Type   Residential Local   State Subscriber Line Charge   State Universal Service Fee   Service Charge   Service Cha	ILEC)         SAC (CETC)         Rate Type         Residential Local         State Subscriber Line Charge         State Universal Service Fee         Wandadooy Extended Area           FR         17.0         0.0	SAC (CETC)   Rate Type   Service Rate   State Subscriber Line Charge   State Universal Service Fee   Service Charge   Servi	FR	SAC (CETC)   Rate Type   Rate Type   State Subscriber Line Charge   State Universal Service Fee   Wandardory Extended Area	SAC (CETC)   Rate Type   Residential Local   State Subscriber Line Charge   State Universal Service Fee   Wandadovy Xxendeed Area   Service Charge   Service	SAC (CETC)   SAC (CETC)   Rate Type   Restrict Rate   State Subscriber Line Charge   State Universal Service Fee   Wannaaoory Extended Area

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0988/OMB Control No. 3060-0819
	July 2013
<010> Study Area Code	351278
<015> Study Area Name	READLYN TEL CO

readlyn@netins.net

2015

<030> Contact Name - Person USAC should contact regarding this data Sharon Huck
<035> Contact Telephone Number - Number of person identified in data line <030> 3192793375 ext.

<020> Program Year

<039> Contact Email Address - Email Address of person identified in data line <030>

<d4>&gt;</d4>	Usage Allowance Action Taken When Limit Reached {select}	Other, No Limit	Other, No Limit	Other, No Limit	Other, No Limit									
	Usage Allowance (GB)	0.0	0.0	0.0	0.0									
<£p>	Broadband Service Usag -Upload Speed (Mbps) (GB)	0.128	0.512	0.768	5.0									
<d2></d2>	Broadband Service - Broadband Service Download Speed - Upload Speed (Mb)	0.512	2.0	3.0	10.0									
<c> <d1></d1></c>	Total Rates and Fees	20.0	39.95	49.95	74.95									
<	State Regulated Fees	0.0	0.0	0.0	0.0									
<	Residential Rate	20.0	39.95	49.95	74.95									
<a2></a2>	Exchange (ILEC)	Readlyn	Readlyn	Readlyn	Readlyn									
<711> <a1></a1>	State	IA	IA	IA	IA									

(800) Operating Companies		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	251278	
	READLYN TET. CO	
	2015	
	Sharon Huck	
<035> Contact Telephone Number - Number of person identified in data line <030>	3192793375 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030>	readlyn@netins.net	
<810> Reporting Carrier Readlyn Telephone Company		
<812> Operating Company Readlyn Telephone Company		
<813>	<a2></a2>	<93>
Affiliates	SAC	Doing Business As Company or Brand Designation
Readlyn Telephone Company	351278	RTC Communications
Community Digital Wireless	359044	CDW
Midwest Venture Partners, LLC		MVP
AVD, LLC		
Readlyn Communications Investment LLC		
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### FCC Form 481, Line 1210: Terms and Condition for Lifeline Customers

### Lifeline Telephone Assistance Program

Financial assistance through the Lifeline program is available to help eligible Iowans afford and maintain basic telephone service. Lifeline participation enables Iowans to stay connected to jobs, family, community resources, and government and emergency services. Lifeline is a federal government program that assists qualified Iowans by providing a monthly credit of \$9.25 on the local telephone bill.

The Lifeline program has recently been streamlined by the Federal Communications Commission. Lifeline benefits are now limited to one wire line or wireless phone per qualified household. Households currently receiving more than one Lifeline service must select a single Lifeline service provider and de-enroll from the program with any other provider(s).

A Lifeline <u>application form</u> is available from your local telephone service provider, the Iowa Utilities Board, or most <u>Community Action Agencies</u> in the state. To apply, simply complete the application form and then return it to your chosen participating provider. Additionally, residents of Tribal lands who are eligible for Lifeline, should check with their local telecommunications provider to inquire about additional benefits, including potential Link-Up telephone-installation benefits.

Information about the <u>number of customers receiving Lifeline assistance</u> is reported by each Iowa telephone company. For more information, call the Iowa Utilities Board (IUB) toll free at 1-877-565-4450, or visit www.fcc.gov/lifeline or www.usac.org

Number of local minutes provided: Unlimited local calling

Equal access toll calls are available and are billed at carriers' standard rates for Lifeline subscribers.

The Readlyn Telephone Company	TELEPHONE TAR	RIFF		PART	- V
		Revised	Sheet No	75	
Filed with Board	Cancels		Sheet No.		
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### **SERVICE CHARGES**

### A. LIFELINE ASSISTANCE

 The Federal Lifeline Assistance Program is a plan which assists qualified low-income applicants with reductions in their monthly local exchange service rate. The assistance applies for a single telephone line at the applicant's principal place of residence. Qualified applicants shall have their monthly local exchange service rate reduced by the federal support amount defined in 47 CFR 54.403.

### 2. Eligibility Requirements

To be eligible for assistance, an applicant must provide documentation showing the applicant (1) meets income-based criterion currently defined as at or below 135 percent of the Federal Poverty Guidelines, OR (2) participates in at least one of the following programs as defined by 47 CFR 54.409:

- a. Medicaid (e.g. Title XIX/Medical, state supplemental assistance)
- b. Supplemental Nutrition Assistance Program (SNAP)
- c. Supplemental Security Income (SSI)
- d. Federal public housing assistance
- e. Low-Income Home Energy Assistance Program (LHEAP)
- f. Temporary Assistance for Needy Families Program (TANF)
- g. National School Lunch Program

The Lifeline customer is responsible for notifying the Company if the customer ceases to participate in any of the public assistance programs listed above.

A Lifeline customer may only receive assistance from one wireline or one wireless telephone provider per household.

### 3. Application for Assistance

An applicant shall request telephone assistance through completion of a certification form provided by the Company as governed by 47 CFR 54.410.

### 4. Rates

- a. The Lifeline customer will receive a monthly credit toward their local exchange service rate. The total monthly credit identified in 47 CFR 54.403 shall be used to reduce the Lifeline customer's rate.
- Toll blocking shall be included with this service offering without charge. No service deposit would be required if applicant voluntarily elects toll blocking with the initiation of Lifeline Service.

ISSUED:	May 28, 2013	EFFECTIVE:	July 1, 2013	
	Date		Date	
BY:	Sharon Huck	General Manager	Readlyn, Iowa 50668	
	Name	Title	Address	

# **ATTACHMENT – LINE 3026**

# **ATTACHMENT REDACTED IN ENTIRETY**